

Electronic Filing System (EFS) Data
Electronic Patent Application Submission
USPTO Use Only

EFS ID: 13006
Application ID: 09683104
Title of Invention: Enhanced Graphic Features for
Computer Assisted Surgery
System
First Named Inventor: Thomas Kienzle
Domestic/Foreign Application: Domestic Application
Filing Date: null
Effective Receipt Date: 2001-11-19
Submission Type: Utility Patent Filing
Filing Type: new-utility
Confirmation Number: 0
Attorney Docket Number: SUR3
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Trademark Office, ou=Department of Commerce, o=U.S.
Government, c=US
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TRANSMITTAL FORM



Electronic Version 1.0.3

Stylesheet Version: 1.0

Attorney Docket
Number:

SUR3

Submission Type: Utility Patent
Filing

Enhanced Graphic Features for Computer Assisted Surgery System

First Named Inventor: Dr. Thomas C. Kienzle III

SUBMITTED BY

Name: Mr. Harold John Fassnacht Esq.
Registration Number: 35,507
Electronic Signature Mark: Harold J.
Fassnacht Date Signed: 20011119

I certify that the use of this system is for OFFICIAL correspondence between patent applicants or their representatives and the USPTO. Fraudulent or other use besides the filing of official correspondence by authorized parties is strictly prohibited, and subject to a fine and/or imprisonment under applicable law.

I, the undersigned, certify that I have viewed a display of document(s) being electronically submitted to the United States Patent and Trademark Office, using either the USPTO provided style sheet or software, and that this is the document(s) I intend for initiation or further prosecution of a patent application noted in the submission. This document(s) will become part of the official electronic record at the USPTO.

Attached Files:

declaration	POApage1a.tif
declaration	POApage2.tif
bibd-transmittal	SUR3apds.xml
fee-transmittal	SUR3fee.xml

specification

specification.xml

Attached Image File(s):

POApage1a.tif

POApage2.tif

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DECLARATION AND POWER OF ATTORNEY

As the below-named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated next to my name.

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

ENHANCED GRAPHIC FEATURES FOR COMPUTER ASSISTED SURGERY SYSTEM

the specification of which is attached hereto.

I hereby state that I have reviewed and understand the content of the above-identified specification, including the claims, as amended.

I acknowledge the duty to disclose information that is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, section 1.56(a).

I hereby claim the benefit under Title 35, United States Code, section 120 of any United States application listed below, and insofar as the subject matter of each of the claims of the application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code, section 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, section 1.56(a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application:

App. Serial No.	Filing Date	Status
60/249,695	11/17/2000	Provisional

I hereby claim foreign priority benefits under Title 35, United States Code, section 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below, and have also identified below any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed:

Prior Foreign Applications	Priority Claimed
(none)	

POWER OF ATTORNEY: As named inventor, I hereby appoint the following attorneys to prosecute this application and transact all business in the Patent and Trademark Office connected therewith:

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DECLARATION: I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.


Thomas C. Kienzle III

11/16/01
(Date)

FEE TRANSMITTAL

Electronic Version 1.1.0

Stylesheet Version: 1.0

Patent fees are subject to annual revisions on or about October 1st of each year.

Small Entity

Independent Inventor

TOTAL FEES AUTHORIZED: \$ 454

BANK (CREDIT) CARD INFORMATION:

Credit Card Number: 1008
Expiration Date: 20020701
Authorized Name: George E. Bullwinkel
Billing Address: 60603

BASIC FILING FEE

Fee Description	Fee Code	Fee Paid
Utility Filing Fee	201	\$ 370

Subtotal For Basic Filing Fee: \$ 370

EXTRA CLAIM FEES

	Fee Code	Fee	Extra Claims	Fee Paid
Total Claims: 17	203	\$ 9	0	\$ 0
Independent Claims: 5	202	\$ 42	2	\$ 84

Subtotal For Extra Claims Fees: \$ 84